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INDICATION FORM**

Application Number	09/175,589
Filing Date	10/20/1998
First Named Inventor	Jacobson
Title	Electronic Record Management System
Art Unit	3624
Examiner Name	Colbert, Ella
Attorney Docket Number	M61-006-01-US

I hereby revoke all previous powers of attorney given in the above-identified application.

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22,854

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I am the:

☐ Applicant/Inventor

☒ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

SIGNATURE of Applicant or Assignee of Record

Signature	<i>A Jacobson</i>	Date	2/25/2005
Name	Andrea Marie Jacobson	Telephone	952-832-0695 (H)
Title and Company	Licensing Manager, MacArthur Investments, LLC <i>Chief Manager</i>		

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

☐ *Total of _____ forms are submitted.

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